01-31-05

09/493,338

Application Number

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| DEMARK TRANSMIT | ΓTAL | Filing Date | J | January 28, 2000 | | | |
| FORM | First Named Invento | or T | oporek, J | porek, Jerome D. et al. | | | |
| | | Art Unit | 2 | 665 | | | |
| to be used for all corresponden | ce after initial filina) | Examiner Name | Ji | ustin M. F | stin M. Philpott | | |
| Total Number of Pages in This S | | · Attorney Docket Nu | mber 1 | 6625-001 | | | |
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| | EN | ICLOSURES (CI | neck all that app | oly) | | | |
| Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declar Extension of Time Requ Express Abandonment Information Disclosure S Certified Copy of Priority Document(s) Reply to Missing Parts/ Application Reply to Missing under 37 CFR 1 | Request Statement Rer Incomplete | Drawing(s) Licensing-related Parelition Petition to Convert to Provisional Application Power of Attorney, R Change of Correspont Terminal Disclaimer Request for Refund CD, Number of CD(s Landscape Tamarks The Commit Account 20 | a evocation evocation edence Address bleence CD ssioner is authorism and the control of the co | 2. Real and Cl | Appeal Con of Appeals: Appeal Con (Appeal Noti Proprietary Status Lette Other Enclo below): turn Postcan quest to With hange of Co | er osure(s) (please identify | |
| | SIGNATURE | OF APPLICANT, | ATTORNEY, | OR AG | ENT | | |
| Signature Signature | d and Townsend | and Grew LLP | · | | | | |
| Roger I. | Reg. No. 41.5 | | | | | | |
| Date January 2 | | 41,599 | | | | | |
| Express Mail Label: EV 29138 | | FICATE OF TRANS | SMISSION/M | AILING | | | |
| I hereby certify that this corres service under 37 CFR 1.10 on 22313-1450 on the date shown | pondence is being de this date: January 2 | eposited with the United 28, 2005 and is address | States Postal S sed to: Commiss | Service with sioner for P | n "Express M Patents, P.O. | ail Post Office to Address" Box 1450, Alexandria, VA | |
| Signature | Sara | 13. The | reak | b | - | | |
| Typed or printed name Sa | ara B. McPeak | • | | | Date | January 28, 2005 | |

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| JAN 2 | Application Number | 09/493,338 |
| REQUEST FOR WITHDRAWAL | Filing Date | January 28, 2000 |
| THADEWAS ATTORNEY OR AGENT | First Named Inventor | Jerome D. Toporek et al. |
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AND CHANGE OF CORRESPONDENCE ADDRESS

| | PTO/SB/83 (09-0 | | | | | |
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| Application Number | 09/493,338 | | | | | |
| Filing Date | January 28, 2000 | | | | | |
| First Named Inventor | Jerome D. Toporek et al. | | | | | |
| Art Unit | 2665 | ٠ | | | | |
| Examiner Name | Justin M. Philpott | | | | | |
| Attorney Docket Number | 16625-001110 | | | | | |

| To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | | | | | | | |
|--|---|--------------------------------------|--------------|---------|--------------------|----------|---|--------|--------|--|--|
| Please | Please withdraw me as attorney or agent for the above identified patent application, and | | | | | | | | | | |
| а | II the attorney | ys/agents of record | | | | | | | | | |
| _ а | all the attorneys/agents (with registration numbers) listed on the attached paper(s), or | | | | | | | | | | |
| ⊠ a | all the attorneys/agents associated with Customer Number 20350 | | | | | | | | | | |
| 1 | NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number. | | | | | | | | | | |
| | The reasons for this request are: Assignee, Mentat Inc. will be represented by another law firm and Assignee and that firm will furnish the U.S. Patent Office with a new correspondence address and power of attorney. | | | | | | | | | | |
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| | | CORRESPON | IDENCE | ADD | RES | <u> </u> | | | | | |
| 1. The | corresponde | ence address is NOT affected by | this withd | rawal. | | | | | | | |
| 2. 🔀 Ch | ange the corr | espondence address and direct | all future o | orrespo | ndend | e to: | | | | | |
| The address associated with Customer Number: | | | | | | | | | | | |
| OR | | | | | | | | | | | |
| Firm o | or dual Name | Mentat Inc. | | | | | | | | | |
| Address | 1145 Gayley Avenue, Suite 315 | | | | | | | | | | |
| City | | Los Angeles | State | CA | | | • | Zip | 90024 | | |
| Country | ntry US | | | | | | | | | | |
| Telephone | Telephone (310) 208-2650 Fax (310) 208-3724 | | | | 724 | | | | | | |
| Signature For Than | | | | | | | | | | | |
| Name | Roger T. Ba | Parrett | | | Registration No. 4 | | | 41,599 | 41,599 | | |
| Date | January 28, | 3, 2005 Telephone No. (303) 571-4000 | | | | 571-4000 | | | | | |
| NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration | | | | | | | | | | | |